Image# 11971821128 PAGE 1/4

FEC FORM 1			TATEM RGANI						Office Us	se Only		
NAME OF COMMITTEE (in	n full)		Check if name s changed)		ample:If typir	ng, type	12FE	:4M5		7		
David Rou				1 1 1 1		1 1 1			1 1 1	_		1
ADDRESS (number a	nd street)	PO Box	2267									
(Check if ac is changed)	ddress	Smithfie					NC NC		/ 7577		 	
				CITY			STATE			ZIP CC	DDE	
COMMITTEE'S E-MA (Check if is change) COMMITTEE'S WEB (Check if is change)	address d) PAGE ADE	Heather	Ford@TheFor									
2. DATE 1.	M / D = 02	J L	2011	0005046	42							
3. FEC IDENTIFIC	CATION NU	MBER	C	C005016	43							
4. IS THIS STATE!	MENT X	NEW	(N) OF		AMEN	DED (A)						
I certify that I have e	examined th	is Stateme	ent and to the	best of my	knowledge a	and belief it	t is true, o	correct a	nd com	plete.		
Type or Print Name	of Treasurer	Ms. Hea	ather Ford									
Signature of Treasure	Ms. Hea er	ther Ford			[Electronico	ally Filed]	Date	1 <u>1</u>	/ D 0	2 /	20	011
NOTE: Submission of			omplete informa						ne penal	ties of 2	2 U.S.C	. §437g.
Office		071741			For further i	information c	ontact:		FEC	FO	 RM 1	

Office Use Only					For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 02/2009)	
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FEC F	Form 1 (Revised 02/2009) Page 2
	COMMITTEE
Candida	te Committee:
(a) X	This committee is a principal campaign committee. (Complete the candidate information below.)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
Name of Candidate	Mr. David Cheston Rouzer
Candidate Party Affilia	NC State NC Sought: X House Senate President District 07
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Co	mmittee:
(d)	This committee is a (National, State (Democratic, Republican, etc.) Party.
Political	Action Committee (PAC):
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
	Corporation Corporation w/o Capital Stock Labor Organization
	Membership Organization Trade Association Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
	In addition, this committee is a Lobbyist/Registrant PAC.
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
Joint Fur	draising Representative:
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
Cor	mmittees Participating in Joint Fundraiser
1.	FEC ID number
2.	FEC ID number C
3.	FEC ID number C

FEC ID number C

FEC Form 1 (Revised 0	12/2009)	Page 3
Write or Type Committee Name		~
David Rouzer fo	or Congress	
	rganization, Affiliated Committee, Joint Fundraising Representative, or Leaders	hip PAC Sponsor
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative Lea	adership PAC Sponsor
Custodian of Records: Identification books and records.	tify by name, address (phone number optional) and position of the person in pos	ssession of committee
Ms. Heathe	er Ford	
Full Name	PO Box 701	
Mailing Address		
	Clayton NC 27528	
Title or Position	CITY STATE	ZIP CODE
Treasurer		5502100
. Treasurer: List the name and any designated agent (e.g., a	I address (phone number optional) of the treasurer of the committee; and the na ssistant treasurer).	me and address of
Full Name Ms. Heathe	er Ford	
Mailing Address	PO Box 701	
	Clayton NC 27528	
Title or Position Treasurer		ZIP CODE 550 - 2100

FEC Forr	n 1 (Revised 02/2009)	Page 4
Full Name of Designated Agent	Morgan Beam	1 1 1 1 1 1
Mailing Address	PO Box 2267	
	Smithfield NC 27577	
Title or Position		ZIP CODE
Banks or Other safety deposit be Name of Bank, I		accounts, rents
safety deposit bo	exes or maintains funds.	accounts, rents
safety deposit be Name of Bank, I	Depository, etc. First Citizens Bank	accounts, rents
safety deposit be Name of Bank, I	Depository, etc. First Citizens Bank 409 East Main Street Smithfield NC 27577	accounts, rents
safety deposit be Name of Bank, I	Depository, etc. First Citizens Bank 409 East Main Street Smithfield CITY STATE	
safety deposit be Name of Bank, I	Depository, etc. First Citizens Bank 409 East Main Street Smithfield CITY STATE	
safety deposit be Name of Bank, I Mailing Address	Depository, etc. First Citizens Bank 409 East Main Street Smithfield CITY STATE	
safety deposit be Name of Bank, I Mailing Address	Depository, etc. First Citizens Bank 409 East Main Street Smithfield CITY STATE	
safety deposit be Name of Bank, I Mailing Address	Depository, etc. First Citizens Bank 409 East Main Street Smithfield CITY STATE	